

VS Form 4-33A Brucellosis Test Record - Continuation Sheet

This form is not to be used alone; rather it is a continuation of the VS form 4-33, Brucellosis Test Record. All entries on VS Form 4-33 should be completed before using this form. The tube numbers will be continued from the numbers on the previous page.

More than one VS Form 4-33A may be required, depending on the number of animals being tested for brucellosis. Complete all boxes on the continuation sheet as are completed in the main form. Each continuation sheet should be numbered in the upper right corner "Page NO" box.

This document is intended to give guidance on how to complete VS Form 4-33A. Recognize that these are not official directions and forms change over time. If you have any questions regarding how to complete this form, contact your VS Area Office. A properly completed form is critical to assure proper compliance.

HERD NUMBER: Herd numbers are assigned by the state. You may not have them when you complete the form; leave blank.

PAGE NO.: Show the total number pages in the shipment on each continuation sheet. For example, a shipment that uses one VS Form 4-33 and two VS Form 4-33A would be numbered : "Page 1 of 3; Page 2 of 3; and Page 3 of 3".

HERD OWNER: Last name, first name, and middle initial of the owner of the herd.

DATE BLED: Date the blood was collected from the animal for testing.

VETERINARIAN: Name of the veterinarian that signed the original VS Form 4-33.

TUBE NUMBER: Instructions may vary depending on the laboratory, but the tube is numbered so it can be referenced to the blood drawn from a specific animal. The tubes are numbered sequentially giving a different number to each tube in the herd tested.

RECORD ALL IDENTIFICATION NUMBERS: Record all forms of identification including eartag(s) and tattoo(s).

VACC TATTOO: List the present calfhood tattoo in the right ear. Record all legible characters.

AGE: List the age of the animal being tested and the units such as "Y" for years and "M" for months. For example, 3Y or 8M.

BREED: Use breed codes. See Breed Code Guide.

SEX: Indicate the sex of the animal (M – Male, F – Female, NM – Neutered Male, NF – Neutered Female).

FLD T: This is the reaction (result) from the field test. P= positive N= negative. The field test is only performed by Veterinary Medical Officers.

LABORATORY RESULTS: The area where the laboratory reports the type of test performed and the results.

TEST INTERP: Test interpretation will be posted by the testing laboratory as follows:

N- Negative

S- Suspect

R- Reactor

There are other codes occasionally used by the testing laboratory such as M for missing sample, or B for broken sample, or W for withheld because an epidemiologist needs to interpret the test result.

CLASSIFIED BY: Reported by the laboratory (*at the bottom of the form*).

DATE CLASSIFIED: Reported by the laboratory (*at the bottom of the form*).

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REMARKS AND ADDITIONAL INFORMATION: Area where additional information of various types could be provided.

REACTOR TAG NUMBER: Record the tag number if a positive animal is tagged and branded.

Using VS Form 4-33 and 4-33A for Testing Swine for Pseudorabies

Check first with the State Animal Health Official (SAHO) in the state where the swine are located to be sure that the state does not have its own official pseudorabies test record form. If there is an official state form, use it, otherwise alter VS form 4-33 and 4-33A as follows:

At the top of the form, cross out BRUCELLOSIS and print PSEUDORABIES. Also print PSEUDORABIES in the REMARKS block.

When testing for the Cooperative State-Federal-Industry Pseudorabies Eradication Program, if you checked block 6, 8, or 9, you must also do the following:

If block 6 is checked, enter one of the following in the REMARKS block:

- Feeder-pig monitoring
- Qualified-negative (QN) herd test
- QN-vaccinated herd test
- Retest of infected herd
- Retest of imported swine
- Gene-altered vaccinated herd test
- Other

If block 8 is checked, enter one of the following in the REMARKS block:

- Breeding herd
- Grower/finisher herd
- Farrow to finish

If block 9 is checked, enter one of the following in the REMARKS block:

- Tracing movement of infected herds
- Tracing source of additions to infected herds
- Circle testing around infected herds
- Explanation for any other reason

Permanent identification includes official eartag, tattoo, and ear notching

If the herd that is being tested is vaccinated, use the REMARKS block to list the type (killed or modified live virus) and brand name of the vaccine used.